U S Department of Labor Office of Labor Management Standards Washington DC 20210

ĩ

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

 Form approved
 Office of Management and Budget
 No 1215-0188
 Expires 11 30 2006

This report is mandatory under P.L. 88-257 as amended Fallure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT: 5

E QUE US	1	
1' File Number U	2 Fiscal Year Covered From	
12462	1 / 1 / 2004 Through 12 / 31 / 2004	
3 Name and address of person filing	4 Name file number and address of labor organization 2 (/	
Name DAVID J DONKIN SR	Name B A C LOCLA 9 PA	
	Labor Organization File Number 540-049	
PO Box Bidg Room No if any	P O Box Building and Room Number if any	
Street 11408 ALTHEA DR	Street 100 KINGSTON DR	
Cnty PITTSBURGH	City PITTSBURGH	
State Pennsylvania ZIP Code +4 15235	State Pennsylvania ZIP Code + 4 15235	
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests? (except as specified in the exclusions set forth in the instructions)		
A. Held an interest in engaged in transactions (including loans) with monetary value from an employer whose employees your organize	or derived income or other economic benefit of zation represents or is actively seeking to represent	
Name and address of Employer (including trade name if any)	7 a Nature of Interest, Transaction or Income to 7 to 1	
Name BRICKLAYER OF WESTERN PA COMBINED FUNDS	MEETING EXPENSES INCLUDING DINNER 3-25-04	
Trade Name If any HEALTH & WELFARE FUND		
PO Box Bldg Room No If any GEM GROUP/ADMINISTRATOR		
Street 1200 THREE GATEWAY CENTER	7 b Amount.	
City PITTSBURGH	\$84	
State Pennsylvania ZIP Code +4 15222	1	
8	Signature	
15 Signature and verification. The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information of the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief true correct, and complete (See the section on penalties in the instructions.)		

submitted in this report (including the information contained in any accompan undersigned's knowledge and belief true_correct, and complete (See the se	ying documents) has been exampled to the instruction on penalties in the instruction	mined by the signatory and is, to the best of the **1 C
0000		•
Signed Could Control	On 8/15/2005	(412) 731-8953
71 /	Date	Telephone Number

Name of Person Filing DAVID DONKIN; SR	File Numbe	# U
B Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from selling or leasing to or otherwork of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	rise dealing with the business ely seeking to represent or rectly to or otherwise	
8 Name and address of Business (including trade name if any)	9 Business deals with	
Name INTERNATIONAL MASONRY INSTITUTE	☑	
Trade Name if any	a Labor Organization b Trust	
PO Box Bidg Room No if any	c Employer	
Street 42 EAST STREET		
City ANAPOLIS		
State Maryland ZIP Code +4 21401		
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing	
Name	PAYMENTS ARE MADE TO THE I INSTITUTE PURSUANT TO COLL AGREEMENTS NEGOTIATED BY T	ECTIVE BARGAINING
Trade Name if any		
P O Box Bldg Room No if any		
Street	11 b Approximate dollar value of such de	ealing
City	12 a Nature of Interest held or income	
State ZIP Code + 4	ANNUAL MEETING BUSINESS EX LODGING AT THE CONTEMPORAR	
	12 b Amount	\$195
		Luciani de la companya de la company
C Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money		
13 a. Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment.	
Name PNC FINANCIAL SERVICES GROUP	ATTENDED GOLF OUTING WITH LAUREL VALLEY ON 7-8-04	H LUNCH AND DINNER AT
Trade Name If any		
PO Box Bldg Room No if any 2 PNC PLACE		
Street 620 LIBERTY AVE		
City PITTSBURGH		-
State Pennsylvania ZIP Code + 4 15222		
13 b is the Business an Employer or Consultant 7	14 b Amount of payment.	\$419

t	
Name of Person Filing DAVID DONKIN SR File Number U	

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)	9 Business deals with
Name UPMC HEALTH PLAN	a Labor Organization
Trade Name if any	
PO Box Bidg Room No if any ONE CHATHAM CENTER	b Trust
Street 112 WASHINGTON PLACE	C Employer
City PITTSBURGH	
State Pennsylvania ZIP Code + 4 15219	
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing
Name BRICKLAYERS MASONS & ROOFERS WELFARE FUND	SERVICE PROVIDER TO HEALTH & WELFARE FUND
Trade Name if any	
PO Box Bldg Room No if any GEM GROUP/ADMINISTRATOR	
Street 1200 THREE GATEWAY CENTER	
City PITTSBURGH	
State Pennsylvania ZIP Code + 4 15222	11 b Approximate dollar value of such dealing \$200
	12 a Nature of interest held or income received
	ATTENDED GOLF CHALLENGE SPONSORED BY SERVICE PROVIDER ON 7 27-04
	12 b Amount

Form LM 30 (2003) Page 3 of 10

Name of Person Filing DAVID DONKIN	SR	-	File Number U

B Heid an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)	9 Business deals with	
Name HIGHMARK BLUE CROSS BLUE SHIELD	a Labor Organization	
Trade Name If any	a Labor Organization	
PO Box Bidg Room No Ifany FIFTH AVENUE PLACE	∑ b Trust	
FO BOX BIOG ROUTING TAILY FIFTH AVENUE PLACE	c Employer	
Street 120 FIFTH AVENUE	L C Employer	
City PITTSBURGH		
State Pennsylvania ZIP Code + 4 15222		
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing	
Name BRICKLAYERS MASONS & ROOFERS WELFARE FUND	SERVICE PROVIDER TO HEALTH & WELFA	RE FUND
Trade Name If any		
PO Box, Bldg Room No if any GEM GROUP/ADMINISTRATOR		
Street 1200 THREE GATEWAY CENTER		
City PITTSBURGH		n name de la companya
The state of the s		
State Pennsylvania ZIP Code + 4 15222	11 b Approximate dollar value of such dealing	non-demonstrative and the second
	12 a Nature of interest held or income received	
	ATTENDED A GOLF OUTING SPONSORED B PROVIDER ON 5 24-04 AT THE PITTSBU	
		The state of the s
	a definition of the second of	Philippe Committee Committ
		abone side
	12 b Amount	\$288

Name of Person Filing DAVID DONKIN SR	File Number U

rait o continuation rage			
C Received from any employer (other than an employer covered under parts A payment of money or other thing of value	and B above) or from any labor relations consultant to an employer any		
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment.		
Name MULTIPLE SERVICE PROVIDERS FOR PENSION PLAN	ATTENDED SCHOLARSHIP GOLF EVENT ESTABLISHED FOR PARTICIPANTS OF THE BUILDING TRADES PENSION FUND ON 8/16/04 THE COST TO ATTEND IS PAID BY		
Trade Name if any BUILDING TRADES SCHOLARSHIP FUND	SERVICE PROVIDERS WHO SPONSOR THE EVENT AND PAID TO A SEPARATE ENTITY BUILDING TRADES PENSION FUND		
P O Box Bldg Room No If any GEM GROUP/ADMINISTRATOR			
Street 1200 THREE GATEWAY CENTER			
City PITTSBURGH			
State Pennsylvania ZIP Code + 4 15222			
13 b Is the Business an Employer or Consultant ?	14 b Amount of payment. \$216		
C Received from any employer (other than an employer covered under parts A payment of money or other thing of value	and B above) or from any labor relations consultant to an employer any		
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment.		
Name			
Trade Name if any			
PO Box Bidg Room No if any			
Street			
City			
State ZIP Code + 4			
13 b is the Business an Employer or Consultant ?	14 b Amount of payment.		
C Received from any employer (other than an employer covered under parts A payment of money or other thing of value	and B above) or from any labor relations consultant to an employer any		
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment.		
Name			
Trade Name if any			
PO Box Bidg Room No If any			
Street			
City			
State ZIP Code + 4			
13 b Is the Business an Employer or Consultant ?	14 b Amount of payment		

Name of Person Filing DAVID DONK	N SR	File Number U

rait A Somme	nauon rage
A. Held an interest in engaged in transactions (including loans) with or derived in employees your organization represents or is actively seeking to represent	come or other economic benefit of monetary value from an employer whose
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income
Name BRICKLAYERS OF WESTERN PA COMBINED FUNDS	MEETING EXPENSES INCLUDING DINNER 5-27-04
Trade Name if any HEALTH & WELFARE FUND	
PO Box Bidg Room No if any GEM GROUP/ADMINISTRATOR	7 b Amount.
Street 1200 THREE GATEWAY CENTER	
City PITTSBURGH	\$139
State Pennsylvania ZIP Code + 4 15222	
A. Held an interest in engaged in transactions (including loans) with or derived in employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income
Name BRICKLAYERS OF WESTERN PA COMBINED FUNDS	MEETING EXPENSES INCLUDING DINNER 7-22-04
Trade Name If any HEALTH & WELFARE FUND	
P O Box Bldg Room No If any GEM GROUP/ADMINISTRATOR	7 b Amount
Street 1200 THREE GATEWAY CENTER	(m10)
City PITTSBURGH	\$114
State Pennsylvania ZIP Code + 4 15222	
A. Held an interest in engaged in transactions (including loans) with or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income
Name BRICKLAYERS OF WESTERN PA COMBINED FUNDS	MEETING EXPENSES INCLUDING DINNER 1/20/04
Trade Name if any THREE RIVERS ANNUITY FUND	
PO Box Bidg Room No if any GEM GROUP/ADMINISTRATOR	
Street 1200 THREE GATEWAY CENTER	7 b Amount
Cdy PITTSBURGH	\$62
State Pennsylvania ZIP Code + 4 15222	

<u> </u>		
Name of Person Filing DAVID DONKIN	SR	File Number U

Part A Continuation Page			
A Held an interest in engaged in transactions (including loans) with or derived in employees your organization represents or is actively seeking to represent	ncome or other economic benefit of monetary value from an employer whose		
6 Name and address of Employer (Including trade name if any)	7 a Nature of Interest Transaction or Income		
Name BRICKLAYERS OF WESTERN PA COMBINED FUNDS	MEETING EXPENSES INCLUDING DINNER 11 23/04		
Trade Name if any HEALTH & WELFARE FUND			
PO Box Bldg Room No if any GEM GROUP/ADMINISTRATOR	7 b Amount.		
Street 1200 GATEWAY CENTER	\$134		
City PITTSBURGH	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
State Pennsylvania ZIP Code + 4 15222			
A. Held an interest in engaged in transactions (including loans) with or derived is employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose		
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest, Transaction or Income		
Name BUILDING TRADES PENSION FUND OF W PA	MEETING EXPENSES INGLUDING DINNER 3-24-04		
Trade Name If any			
P O Box Bidg Room No If any GEM GROUP/ADMINISTRATOR	7 b Amount		
Street 1200 THREE GATEWAY CENTER			
City PITTSBURGH	\$32		
State Pennsylvania ZIP Code + 4 15222			
A Held an interest in engaged in transactions (including loans) with or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose		
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income		
Name BUILDING TRADES PENSION FUND OF W PA	MEETING EXPENSES INCLUDING DINNER 6 11-04		
Trade Name If any			
PO Box Bldg Room No if any GEM GROUP/ADMINISTRATOR	7 b Amount.		
Street 1200 THREE GATEWAY CENTER			
Cnty PITTSBURGH	\$38		
State Pennsylvania ZIP Code + 4 15222			

Mama	of Person	Filing	DAUTD	DONKIN	CD
иани	UI FEISON	rung	DAVID	DONKIN	эĸ

File	Nur	nber	1

A. Held an interest in engaged in transactions (including loans) with or derived in employees your organization represents or is actively seeking to represent.	come or other economic benefit of monetary value from an employer whose			
Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income			
Name BUILDING TRADES PENSION FUND OF W PA	MEETING EXPENSES INCLUDING DINNER 9-24-04			
Trade Name if any				
PO Box Bidg Room No if any GEM GROUP/ADMINISTRATOR	7 b Amount.			
Street 1200 THREE GATEWAY CENTER	622			
City PITTSBURGH	\$32			
State Pennsylvania ZiP Code + 4 15222				
A Held an interest in engaged in transactions (including loans) with or derived employees your organization represents or is actively seeking to represent	ncome or other economic benefit of monetary value from an employer whose			
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income			
Name BUILDING TRADES PENSION FUND OF W PA	MEETING EXPENSES INCLUDING DINNER 12 10 04			
Trade Name if any				
PO Box Bidg Room No if any GEM GROUP/ADMINISTRATOR	7 b Amount			
Street 1200 THREE GATEWAY CENTER				
City PITTSBURGH	\$43			
State Pennsylvania ZIP Code + 4 15222				
A Held an interest in engaged in transactions (including loans) with or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose			
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income			
Name CHARTWELL INVESTMENT PARTNERS	ATTENDED GOLF OUTING ON 2/18/04			
Trade Name if any				
PO Box Bidg Room No if any				
Street	7 b Amount.			
Street 1235 WESTLAKES DR SUITE 400				
City BERWYN	\$200			
State Pennsylvania ZIP Code + 4 19312				

Name of Person Filing	DAVID DONKIN	SR	File Number U	

A Held an interest in engaged in transactions (including loans) with or derived in employees your organization represents or is actively seeking to represent.	ncome or other economic benefit of monetary value from an employer whose			
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income			
Name KOERNER COLAURSSO AND BLOOM P A	RECIEVED CHRISTMAS GIFT BASKET OF FOOD			
Trade Name if any				
PO Box Bidg Room No if any	7 b Amount.			
Street ONE GATEWAY CENTER 13TH FLOOR				
City PITTSBURGH	\$74			
State Pennsylvania ZIP Code + 4 15222				
A Held an interest in engaged in transactions (including loans) with or derived employees your organization represents or is actively seeking to represent.				
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest, Transaction or Income			
Name				
Trade Name if any				
PO Box Bidg Room No if any	7 b Amount			
Street	7 b Allount			
30 561				
City				
State ZIP Code + 4				
A Held an interest in engaged in transactions (including loans) with or derived employees your organization represents or is actively seeking to represent	income or other economic benefit of monetary value from an employer whose			
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income			
Name				
Trade Name if any				
PO Box Bldg Room No if any				
	7 b Amount.			
Street				
City				
State ZIP Code + 4				

Name of Person Filing	DAVID	DONKIN	SR

File	Number	r I

Fait A Continuation 1 age			
A. Held an interest in engaged in transactions (including loans) with or derived in employees your organization represents or is actively seeking to represent.	come or other economic benefit of monetary value from an employer whose		
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income		
Name BRICKLAYERS OF WESTERN PA DOMBINED FUNDS	MEETING EXPENSES INCLUDING DINNER 10 19 04		
Trade Name If any THREE RIVERS ANNIUTY FUND			
PO Box Bidg Room No if any GEM GROUP/ADMINISTRATOR	7 b Amount.		
Street 1200 THREE GATEWAY CENTER			
City PITTSBURGH	\$46		
State Pennsylvania ZIP Code + 4 15222			
A. Held an interest in engaged in transactions (including loans) with or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose		
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income		
Name BRICKLAYERS OF WESTERN PA COMBINED FUNDS	MEETING EXPENSES INCLUDING DINNER 1 22 04		
Trade Name If any HEALTH & WELFARE FUND			
PO Box Bldg Room No if any GEM GROUP/ADMINISTRATOR	7 b Amount		
Street 1200 THREE GATEWAY CENTER			
City PITTSBURGH	\$113		
State Pennsylvania ZIP Code + 4 15222			
A Held an interest in engaged in transactions (including loans) with or derived employees your organization represents or is actively seeking to represent	income or other economic benefit of monetary value from an employer whose		
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income		
Name BRICKLAYERS OF WESTERN PA COMBINED FUNDS	MEETING EXPENSES INCLUDING DINNER 9 23-04		
Trade Name if any HEALTH & WELFARE FUND			
PO Box Bidg Room No If any GEM GROUP/ADMINISTRATOR	7 b Amount		
Street 1200 THREE GATEWAY CENTER			
City PITTSBURHG	\$102		
State Pennsylvania ZIP Code + 4 15222			